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CONFIRMATION NO. 7986

SERIAL NUMBER 09/921,066	FILING OR 371(c) DATE 08/02/2001 RULE	CLASS 607	GROUP ART UNIT 3762	ATTORNEY DOCKET NO. PRC-4	
APPLICANTS Thomas H. Foster, Rochester, NY; Patrick R. Connelly, Rochester, NY; ** CONTINUING DATA ***** This application is a CIP of 09/839,286 04/20/2001 PAT 6,795,730 which claims benefit of 60/198,631 04/20/2000 ** FOREIGN APPLICATIONS ***** IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 09/25/2001					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____		STATE OR COUNTRY NY	SHEETS DRAWING 12	TOTAL CLAIMS 14	INDEPENDENT CLAIMS 1
ADDRESS 37282					
TITLE MRI-COMPATIBLE IMPLANTABLE DEVICE					
FILING FEE RECEIVED 501	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		